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LEYDE (HOLLANDE). — E. J. BRILL.

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ARNOLDUS BOOT AUTHOR OF ONE OF THE FIRST DESCRIPTIONS OF RICKETS (1649)

BY

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Every-one, who has had opportunity to study the famous book of Franciscus Glisson: "De Rachitide sive Morbo Puerili qui vulgo The Rickets dicitur Tractatus" ¹⁾, issued at London in 1650, will conclude, that it wholly deserves the title of honour, which Norman Moore bestows on it: one of the monuments of English medicine ²⁾. We may not agree with the author's ideas about the causes of rickets, which are conform to the humoral-pathologic conceptions of his time and chiefly rest on speculative contemplations, yet we are bound to admire the detailed and systematical description of his subject, his clever classification of primary and accessory symptoms and his accurate control of clinical observation by the results of careful dissections.

Our admiration with this masterpiece of medical literature, the value of which Dr. Gee compared with that of the works of

1) De Rachitide sive Morbo Puerili qui vulgo the Rickets dicitur Tractatus; opera primo ac potissimum Francisci Glissonii Doctore et publici Professoris Medicinae in alma Cantabrigiae Academia et Socii Collegii medicorum Londinensium, conscriptus: adscitis in operis societatem Georgio Bate et Ahasuero Regemortero. Medicinae quoque Doctoribus et pariter Sociis Collegii Medicorum Londinensium. Londini. Typis Guil. Du-gardi; Impensis Laurentii Sadler et Roberti Beaumont: apud quos veniunt in vuo vulgo-vocata Little Britain 1650.

2) Norman Moore M.D. The history of the first treatise on rickets. Saint. Bartholomew's Hospital Reports, Vol. XX, 1884, page 71.

Vesalius, Harvey, Morgagni and Laennec ¹⁾, may however not forbear us to accept without any objection Glisson's assertion, who declares in his introduction: "Qui velit attentius signa huius affectionis contemplari, facillime sibi persuadet, morbum esse plenum novum, neque unquam fuisse a veteribus aut neotericis in libris suis practicis de morbis infantum hactenus divulgatis descriptum."

We may admit, that it will prove to be impossible, to discover in the books of any of his predecessors a description of rickets, which can be compared with that of Glisson and his coöperators, yet it will appear, not only, that there exist rather strong arguments of the prevalence of rickets in former centuries, but also, that many authors had given already a more or less accurate description of pathological conditions, connected with that disease. A detailed account of quotations, indicating with more or less certitude the existence of rickets, may be found in the articles of Ebstein ²⁾ and Delpuch ³⁾, who have succeeded to demonstrate, that this disease probably existed already in classic times.

I may refer here to quotations from Plato, who advises not to compel little children to walk, before they are strong enough, as they would run the risk to become bandy-legged and to one of the odes of Horatius, wherein he sketches children with curved legs and swollen ankles.

Galen describes rather amply several bodily abnormalities of children, which may be imputed to a wrong treatment and an abnormal softness of the bony system. Among various difformities he mentions especially crooked legs, as caused by too early walking and the pigeon-breast and hump-back, which he ascribes to strong and faulty bandaging by their nurses ⁴⁾.

It is remarkable, that Soranus in his Gynaecology, in which he also describes such abnormalities of legs and spine, gives evidence of having an idea of the influence of unfavorable hy-

1) Address at the Meeting of the British Medical Association on the opening of the Section of Diseases of Children, 1883.

2) Wilhelm Ebstein. Ueber das Vorkommen rachitischer Skeletveränderungen im Altertum und Mittelalter, Virchow's Archiv, Bd. 193, 1908.

3) Armand Delpuch. Le rachitisme et la médecine ancienne. Presse médicale 102. 12 Dec. 1900.

4) Vide Delpuch l.c.

giënic conditions. He observes, that such difformities occur frequently in Rome and ascribes them to the humidity of the soil in that city, as it is moistened by many cold currents. We may assume, that the insufficient hygiënic conditions in that overcrowded town, with its slums and alleys may have caused the same effects, which we daily observe as the results of a crowded population and the want of light and air ¹⁾. I will abstain from quotations of other authors, to be found in the articles mentioned, yet there are two dutch physicians of the 16th and 17th century, who make allusions to infirmities of children, which may be imputed to rickets. In one of the observations of Petrus Forestus (1522—1597), he describes the gibbositas and observes: “Sed hic sciendum, quod vertebris dorsi, tum lato ossi pectoris (quod thorax dicitur, ad quod semicirculi costarum verarum terminantur) ut incurventur intus et ecterius accidat et foedam corporis faciant figuram cum attractione colli et elevatione humerorum atque exsiccatione coxarum vel ancharum. Prima (causa) est oscium praedictorum teneritas et mollities, similiter et ligamentorum eius, sicut accidit pueris et infantibus, quare non possunt molem capitatis et gravitatem propriam sustentare” ²⁾.

Another dutch physician, Johan van Beverwyck (1594—1647) the author of a very popular handbook of hygienics: „De schat der Gesontheit” (The treasure of health), advises, not to force young children to walk too early, as their legs are often not strong enough and will bend under the weight of their body ³⁾. Although it would be rather rash to deduce from such cursory and incomplete observations, that the authors had a satisfactory conception of the clinical entity, which we nowadays are used to call rachitis, yet it seems to me, that they prove, that rickets occurred several centuries before Glisson had described them

1) L. Aschoff. Ueber das Vorkommen der Rachitis im Altertum, Janus 1901, p. 206. (Citation from: Die Gynaekologie des Soranus. Ed. Luneburg und Huber 1894).

2) Dom. Petri Foresti Alcmariani M.D. Observationum et Curationum Medic. ac. chirurg. Op. omnia quatuor tomis digesta Rothamogi Sumpt. Joann. et David. Berthelin Fratr. MDCLIII Tom. III Obs. XXII.

3) Alle de Wercken zoo in de Medicyne, als Chirurgie van den Heer Joan van Beverwyck, Amsterdam Jan Jacobsz. Schipper op de Keyzersgracht. Schat der Gesondheyt, p. 169.

Besides such vague and short quotations, which may be gathered from the works of several classic authors, there exist however a number of more ample and accurate descriptions of that disease, which leave no room for any doubt and were published before the famous book of Glisson had made its appearance. As the text of one of them was recently published in the *Opuscula Selecta Neerlandicorum de Arte medica*¹⁾, it may have some interest to communicate some details of that treatise and its author. In the 12th chapter of the: "*Observationes medicae de affectibus omissis*", a 12^o published by Arnoldus Bootius and issued in 1649 by Newcomb and Witaker at London²⁾, one may find a description of the "*tabes pectora*", which easily may be recognised as the disease, which owes his name *rachitis* to Glisson's treatise.

Before analysing the contents of this chapter, it may be desirable to afford some biographical notes of its author.

Arnoldus Boot was born in the year 1606 at Gorinchem, a little town in South-Holland, where his father lived since 1595 and held the office of collector of convoys and licenses. He descended from a distinguished stock, as some of his ancestors had occupied the posts of burgomasters of Dordrecht and treasurer of the famous abbey of Egmond. As to the origin of his family, which Godefroy traced back to the beginning of the 12th century, we may accept his assertions with some legitimate doubt. One of his contemporaries at least accuses him of having exalted and rose-coloured ideas about his genealogy: "extolling it by sheer fancy, without any evidence". In 1608 Godefroy removed to the Hague, where he lived till 1625. In that year he departed from there with his family to London and died there soon after his arrival. Arnoldus Boot and his elder brother Gerardus studied at that time at the University of Leyden, where they graduated in 1630 as doctors of medicine.

1) *Opuscula Selecta Neerlandicorum de Arte Medica*. Fasciculus quintus quem Curatores Miscellaneorum quae vocantur *Nederlandsch Tijdschrift voor Geneeskunde* collegerunt et ediderunt. Amstelodami Sumptibus Societatis MCMXXVI, pag. 260.

2) *Observationes medicae de affectibus omissis*. Authore Arnoldo Bootio. Medicinae Doctore, antehac Proregis, Ordinum atque Exercitium Hiberniae Archiatro. Jam vero Lutetiae Parisiorum Medico Clarissimo. Londini Excudebat Tho Newcomb pro Tho. Witaker ad Insignia Regalia in Coemiterio D. Pauli 1649.

In that year, they removed also to London, where they founded a practice and soon attained important positions, as Gerard became physician in ordinary of Charles I, during the last years of his reign, whereas Arnoldus established in 1636 in Dublin as physician of Algernon Sydney, duke of Leicester. In 1642 he married there Mary Dongan and dwelled in 1643 in a house in the Fishamble-Street.

As to the abode of Arnoldus Boot in Ireland, I owe the following particularities to the kindness of Dr. Kirckpatrick of Dublin.

Besides his medical studies, Arnoldus Boot, in coöperation with his brother Gerardus, occupied himself also with other scientific subjects. As the result of their mutual study they published in Juli 1641 at Dublin a book on Aristotelian philosophy, dedicated to Jacques Usher, Archbishop of Ireland and to Robert Sydney, Earl of Leicester ¹⁾. Another fruit of the coöperation of the two brothers was a book entitled: "Ireland's Natural History, written by Gerard Boate, late Doctor of Physick to the State in Ireland, published by Samuel Hartlib in 1652, for the common good of Ireland and more especially for the benefit of the Adventures and Planters therein".

As to the last book and the motives to dedicate the first to Archbishop Jacques Usher, we learn from Walter Harris the following: „Gerard Boate, a Dutch man, was, with his Brother Arnold, educated at Leyden, but afterwards practised Physick in London and then both were invited thence into Ireland by Archbishop Usher, and Gerard became afterwards Physician to the State, in which Office he died on the 19th of January 1649, in a few months after his arrival in Ireland. He had laid out a considerable Part of his Fortune on the Escheated Lands there, according to several acts made by the King and Parliament. He writ the undernamed treatise long before he had been in the Country, having begun and finished it in the year 1645. His brother Arnold had lived eight years in Dublin and in that time made many journeys, in

1) *Philosophia Naturalis Reformata. Id est Philosophiae Aristotelicae accurata examinatio, ac solida computatio, et novae ac verioris introductio. Per Gerardum ac Arnoldum Botios, Fratres, Hollandos, Medicinae Doctores. Dublinii in Hibernia, ex officina Typographica Bibliopolarum. Anna nati Christi M.DCXLI Mense Julio 4°.*

the course of his practice, and especially through Leinster and Ulster; and it was from conversations with him in London, in 1644, and from Sir William and Sir Richard Parsons, and other Refugees from Ireland, that he picked up the materials for writing his Book. It is no wonder then that his accounts are so lean and imperfect, and his errors so many in point of the topography of the Kingdom, but it is much to be wondered at, that a stranger to the country should have done so well" ¹).

In: Ireland's Natural History, there is a long letter from Arnold Boate to Samuel Hartlib, dated "Paris 10/20 Aug." In this letter Arnold Boate says, that, though the book was written in the year 1645, his brother Gerard did not go to Dublin till "the latter end of the year 1649 and dyed at Dublin within a very short while after he was arrived there viz. on the 9/19 of January 1650/49". He says that Gerard had learned about the country from him, "I being come from Dublin to London in the beginning of May 1644 and being stayed there till the latter end of October". Gerard had also had conversations with "several of those gentlemen, whom the blood combusters of Ireland had driven away thence, and made to resort to London". Arnold goes on to say that he had studied the country closely "during those eight years that I lived in that Iland, whereunto I had so much the more opportunity, because that, as my constant abode was in Dublin, so I made many journeys into the countrie and by means thereof saw great parts of it, especially of the Provinces of Leinster and Ulster".

The extensive knowledge of Arnoldus Boot however was not limited to his medical studies and the subjects treated in the books mentioned; in the last years of his life he wrote two books about the Hebraic Text of the Old Testament, the first of it dedicated to Jacobus Usher, archbishop of Ireland. It seems that he could boast of some authority on this subject, at least in the year 1650 he moved to Paris in charge of his protector Jacob Usher, in order to make investigations about manuscripts.

Although there exist no official dates about this abode at Paris,

¹) Walter Harris: The writers of Ireland (The works of Sir James Usher) Dublin 1745.

this defect is compensated by some picturesque notes from the letters of Guy Patin; the dean of the Faculté de Médecine, who had the opportunity of making Boot's acquaintance. As Boot belonged to the iatrochemical school, it will not surprise, that Patin prepared him no enthusiastic wellcome and contemplated the faults and peculiarities of his colleague with a keen eye. Indeed, the peevish and touchy dean, who filled his life with interminable and obstinate quarrels, had no greater antipathies, than those, who despised his beloved bleedings and purgations and put their faith in such dangerous novelties as antimony and other chemical products. To begin with a personal description of Boot, who had irritated him, on their very first meeting, by asking him some books on chemistry, he sketches him as "un grand garçon de cinquante ans, avec des yeux enfoncés, une voix éclatante, appuyé sur un bâton, avec des pieds, qui n'étaient guère bons et une tête fort branlante".

The explanation of such uneasy symptoms is obvious: "la vapeur d'antimoine n'épargne personne". The character, knowledge and behaviour of such an individual answered, according to Patin, to that repulsive appearance. A blunt ignorance, especially of medicine, together with pride and irritability, two vices of which Patin himself had some experience, were his principal properties. As a summary he concludes his letter with the malicious consideration: "On dit ordinairement ici, que les Anglois sont méchants et malins et que les Hollandois sont superbes; le dit seigneur a l'un et l'autre".

In a following letter, he finishes his critical contemplation of Boot with the venomous sentences: "C'était un grand Hollandois, qui avoit les yeux fort enfoncés et le nez aigu, qui, faute de pratiques, après avoir tué ici sa femme, ses deux enfants et avec l'antimoine, s'en est retourné en Angleterre, n'ayant rien pu trouver, ni dans Paris, ni au faubourg St. Germain, qui le put arrêter. J'ai vu plusieurs malades, qu'il avoit servis, mais il ne prenoit point le chemin de les guérir. Il est médecin, comme je suis capitaine; voilà comment il a été ici clarissime". This charge of murder should not be accepted too literally as Patin generally didn't spare with it, it seems however that his disapproval of Boot's appearance not only

relied on a peremptory antipathy, as Boot died in the same year.

As for the book of Boot, in which he describes the rickets, Patin declares in his letter of 8 July 1650 to Charles Spon, to have learned, that Boot was busy with a book, entitled: "*Observationes medicae de affectibus omissis*", but observes, that he don't think much of it. It is remarkable, that a bibliomane as Patin should have overlooked, that this book was issued already the year before and that he mentions only in a letter of 30 December 1653 to have seen it. As Boot not belonged to his circle of friends, his criticism is short and decisive. Referring to the title of *Parisiiorum medicus clarissimus*, with which Boot ornates himself, he declares: „Sur quoi, je vous donne avis, que ce clarissime ne vit jamais claire", without deigning to give any argument of this crushing judgment ¹⁾.

How far this subjective description of Boot and his manners agrees with reality, will be hard to decide. At all events it will prove to be prudent to keep in mind the note, which one of the former owners of an exemplar Boot's book, wrote down on its fly-leaf: "*de hoc Arnoldo Books mentionem fecit Guido Patinus. Non amabat hunc hominem, qui tunc Parisiis versabatur, duriorumque sententiam de eo tulisse videtur*".

After these brief and defective particularities of Arnoldus Boot's cursour of life, I will give some particularities about his *Observationes*, in the twelfth chapter of which he describes the *tabes pectoraea*, by which name he designed the rickets. It seems, that the first edition had but little success, as Bartholinus, only a few years after its appearance, noted down in his *Observationes* some ideas of Boot, which he declared to have learned from oral information and wished to hand down to posterity, probably not knowing, that Boot had published them already. In the second edition of the *Observationes*, issued in 1664 at Helmstadt by Henricus Meybom, the editor declares to have

1) J. H. Reveillé—Parise. *Lettres de Guy Patin*, nouvelle édition, augmentée de lettres inédites. Paris 1846.

Tome II. lettre CCXXXI à Charles Spon, 8 July 1650.

Tome III. lettre CCCXV à André Falconet, 30 Dec. 1653.

had great trouble in acquiring an exemplar of the first edition, as it had become very scarce ¹⁾).

Although there were issued still two later editions ²⁾, Boot's booklet seems to have come in complete oblivion, at least Van Swieten in his commentaries to the aphorisms of Boerhaave declares: "As for Boot, I have found, that a certain Arnoldus Boot has written a treatise on affections, not mentioned by the classics, which was issued in 12° at London in 1649, but among the titles of the diseases it treats, I have not found the rachitis, neither any trace of the author" ³⁾).

Probably Van Swieten has contented himself with a table of contents of Boot's book, wherein the name rachitis lacks, as Boot entitles this disease as *tabes pectora*.

A short account of Boot's chapter: *de tabe pectora*, gives the following particularities.

This disease has occurred frequently in the last years in England and Ireland, although some years ago it was rather rare or almost unknown. Its victims are chiefly young children, who have not yet attained their second year. The principal symptoms, manifesting themselves chiefly at the head, the chest and the joints, are the following:

The foremost part of the chest, which should be broad and flat, narrows in such a way, that the breast-bone projects as the keel of a ship.

The last ribs are drawn inward at the height of the stomach and produce in that way a pit on both sides.

The ribs are rough and uneven by nodosities, growing on them.

Difficult breathing and a dry cough occur in consequence of the narrowing of the chest.

Other signs are:

1) *Arnoldi Bootii, medici clarissimi Observationes medicae de affectibus omissis secundum editae. Cum praefatione Henrici Meibomii. Helmestadi Typis et sumptibus Henningi Mulleri. Academiae Typogr. 1664.*

2) *Frankfurt-Leipzig 1676. à Moinichen. Observationes med. chir. missae ad Thomam Bartholinum, nunc a Josepho Lansonio adauctae, quibus accessere Arnoldi Bootii et al med. doct. Observationes etc. Ferrariae, sumpt. et typ. H. Filoni 1688 (Vide E. C. v. Leersum, Inleiding Opuscula Selecta V. 1926).*

3) v. Swieten. *Comm. in Boerhaavii aphorism. T. V. pag. 582.*

Increased size of the head with atrophy of the lower parts of the body as hips and legs, in such a way that the children become inapt to walk, even such, as were able to move readily and quickly before.

Difformity of the spine, which projects backwards and swelling of the ankles and the wrists, which the English call doubling of the joints.

Swelling and tension of the belly, chiefly on the right side in the hepatic region, in such a degree, that it becomes impossible to impress it and to touch the inner side of the last ribs.

Although this description neglects several symptoms s. a. the softness of the bones, the incurvations of the limbs, the pain, accompanying each movement of the joints, the delay of the closing of the skull, the faulty and retarded dentition and some other symptoms of minor importance, it is clear enough to recognise the rickets from it.

Comparing this description with that of Glisson, we may admit that there exist great and important differences. Glisson surpasses Boot not only by his accuracy and his completeness, but distinguishes himself also by a systematical and intelligible classification for which we look in vain in Boot's treatise.

As for the characteristic symptoms or *signa diagnostica*, he derives them from three general causes, determining the nature of the disease, namely:

- 1 Laxities and mollities, manifesting themselves in skin, muscles, bones and joints.
- 2 Debilitas of such parts, as are the instruments of motion.
- 3 Ignavia et torpor, the results of a defective nutrition.

Besides the symptoms, to be found in Boot's description, he mentions also the general emaciation, the bossy frontal bones, the incurvation of the limbs and the distended frontal veins, so often seen in that disease.

Although the description of Glisson surpasses that of Boot in completeness, especially as it observes one of the characteristic symptoms, the incurvation of the bones of the legs, yet it is remarkable that neither Boot nor Glisson have noticed the primary cause of this difformity: the softness and the flexibility of those bones. Although Glisson's assertion that the mollities shows

itself in the skin, the muscles and the bones, seems to prove, that he had observed it; yet discussing the cause of the inflexion and the difformities of the legs, he rejects wholly the idea that a softness of the bones should be looked at as a characteristic symptom of rickets. I don't believe, that there can be any doubt about the intention of his words: "There are some, who have supposed that in this disease the bones sometimes are as weak as wax, but we have never seen it, nor have heard it from an eye-witness, worth any trust. Therefore we reject this sign as inaccurate and fictive." We may conclude from these words, that others had noticed this symptom already. Indeed it is to be found in the dissertation of Daniël Whistler, which was published in 1645 at Leyden ¹⁾. As I had no opportunity to have a look in that book, I was obliged to rely for that information on Norman Moore's article, in which he discusses Whistler's claims on priority. The barbaric name: Paedosteocaces, by which Whistler distinguishes the rickets, emphasizes the importance he ascribed to this symptom.

As for the aetiology of rickets, both Boot and Glisson have committed the fault, so common in their time, to misuse a single exact observation as the base of fantastic speculations. It appears that Boot, impressed by the enlargement of the liver, which should increase to thrice its normal volume, looks at this organ as the source of the disease. The enlarged liver oppresses the lungs, whereas the thorax accommodates itself to the diminished volume of those organs. In that way the blood, not finding room enough in the lungs, reflows to the liver increases again its volume and causes in that way a *circulus vitiosus*.

Contrary to Boot, Glisson imputes rickets to an *alogotrophia* or a *nutritia inequalis et improportionalis*. Every symptom can be interpreted by an irregularity of the circulation and the distribution of the blood, which makes some parts grow immoderately and weakens others by malnutrition. The increased supply of blood is the cause of the swollen joints, whereas the shaft of the bones becomes thinner by want of nutrition.

It will refrain from a description of Boot's and Glisson's ideas about the primary causes and the treatment of rickets, as they

1) Norman Moore. St. Bartholomew Hospital Reports l.c. p. 76.

seem to me of minor importance and I only intended to compare the value of their descriptions of this disease.

Comparing them, there can be no doubt, that Glisson surpasses Boot by his orderly and systematic classification of the symptoms, his sharp discernment of principal and accidental signs and his habit to control his clinical observations by the results of dissections. Nevertheless the description of Boot is clear enough to convince each impartial reader, that the disease, which he describes, can be no other than that, which we know as rickets. Even a cursory lecture of his chapter: *De Tabæ pectoræ*, will prove, that he has deserved a more impartial judgment, than that of Norman More, who observes, that it only gives evidence of a knowledge of the talk prevalent on the subject of rickets and entitles Boot to no more than the credit of having observed that the disease is to be seen in Paris and in Ireland, as well as in London.

His formal declaration, that he regularly has found an enlarged liver at the dissection of children, who had died from rickets and his assertion, that he and his brother often had witnessed the good results of their usual cure may not be rejected without formal evidence of their falsehood.

This plain description of rickets, which appeared in 1649, marks Boot as one of the predecessors of Glisson, the more as its contents don't permit any doubt about the opinions of its author. As neither Boot nor Glisson don't give any evidence of having been acquainted with each others inquiries, one might suppose, that there hasn't existed any connection between them. Nevertheless this possibility should not be rejected too prematurely. It seems improbable, that the investigations of Glisson and his seven coöperators, which lasted nearly five years, should have remained secret to other members of the medical profession. As Glisson lectured at the College of Physicians and three of his assistants, Regemorter, Paget and Wright had graduated at Leyden in the years 1635, 1639 and 1642, there existed every opportunity for Arnoldus Boot and his brother Gerardus, who lived in that time at London to become acquainted with them.

This possibility is enlarged by the circumstances that Dr. Bate one of Glisson's partners had attended Charles I at Oxford and

that Jonathan Goddard, an other of his coöperators, on the date of the publication of Glisson's book, recently had served as chief-physican to the army during Cromwell's Irish expedition.

However, as long as there exist no indisputable indications to support such suspicions, we should abstain from a sentence about the claims of Whistler, Boot and Glisson on originality. Neither the thesis of Whistler, nor Boot's chapter darkens the glory of Glisson, who has enriched medical literature with a complete and scientific monography of rickets, which will remain a model of classical aetiological description. Although acknowledging the merits of Glisson, yet it seems to me, that Boot deserves more than the oblivion, of which he has become a victim, the more as the lecture of his *Observationes* will convince us of the truth of the sentence by which Henricus Meybom announces the second edition of them: "*Sane si nihil aliud praeter hunc libellum edidisset, noster Arnoldus Bootius, ingenium et eruditionem ipsius hic tanquam ex ungue licuisset aestimari*".
